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Bib Data Sheet

CONFIRMATION NO. 7208

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|---|---|-------------------------------|---|--|
| <b>SERIAL NUMBER</b><br>09/922,473  | <b>FILING OR 371(c) DATE</b><br>08/03/2001<br><b>RULE</b>   | <b>CLASS</b><br>604           | <b>GROUP ART UNIT</b><br>3763   | <b>ATTORNEY DOCKET NO.</b><br>CTREE-72853<br>(155696033-P01) |
| <b>APPLICANTS</b><br>Alex Urich, Mission Viejo, CA;   |   |                               |   |  |
| <b>** CONTINUING DATA *****</b><br>This appln claims benefit of 60/274,451 03/09/2001   |   |                               |   |  |
| <b>** FOREIGN APPLICATIONS *****</b>  |   |                               |   |  |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 09/12/2001</b>  |   |                               |   |  |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met Allowance<br>Verified and Acknowledged<br>Examiner's Signature _____ Initials _____ |   | <b>STATE OR COUNTRY</b><br>CA | <b>SHEETS DRAWING</b><br>2  | <b>TOTAL CLAIMS</b><br>28                                    |
|   |   |                               | <b>INDEPENDENT CLAIMS</b><br>6  |  |
| <b>ADDRESS</b><br>24201   |   |                               |   |  |
| <b>TITLE</b><br>Surgical flow restrictor and filter   |   |                               |   |  |
| <b>FILING FEE RECEIVED</b><br>547   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |